

that the best in medical service can be had by the average man at a cost he can afford. Here is a true extension of medical care for the benefit of the people, sponsored by the doctors themselves and operated without governmental regulation or interference with either recipient or provider.

These accomplishments have not been gained without a struggle. There have been many dark days for C.P.S., days when both the beneficiary and the physician members have doubted the wisdom of the original plan. There have been moments of doubt in the minds of even the staunchest physician supporters of the program—but let it be noted that this doubt came not from the philosophy of the program but from the apparently unreceptive attitude of others. There have been threats of withdrawal from the service. There have been actuarial problems, arising out of the inability to provide the best in service at the least in cost. There have been attacks from politicians who would use the experience of C.P.S. as the foundation for inspired plans to

set up a state monopoly to regulate all medical care.

These doubts, these threats, these attacks have been weathered. C.P.S. has continued to operate, to grow, to serve. Its increasing enrollments tell the story with eloquent clarity. Its roster of physician members reflects its acceptance by the profession. Admittedly C.P.S. is still a pilot plant. But, administered by physicians, it has repeatedly met changing conditions with a flexibility not to be expected of a government bureau, meanwhile keeping its eye on the original goal of public service.

A child of ten normally rates a birthday cake with ten candles. California Physicians' Service is this child and the cake and candles are here in the minds of the people of California. The first ten years have produced a sturdy, healthy, progressive child; the next ten may be expected to see a continued growth along the same line. In retrospect the progress looks awfully good; in prospect we can see everything to make us proud and to warrant the retention of the program of the founders.



The A.M.A. 12-Point Program

Kicking off its new public relations program, the American Medical Association has announced a 12-point plan for the extension and improvement of medical care for all the American people.

Announcement of this program, which will be found elsewhere in this issue, at a meeting of representatives of all state medical associations in Chicago on February 12 brought forth a cheer from the audience. Here, at last, was a concrete, progressive, positive program adopted by the national organization in furtherance of the aims of the Association and for the benefit of the American public. Critics of the A.M.A., including, unfortunately, some former prominent A.M.A. officials, hastened to decry the program as window dressing for a sinister campaign of lobbying and propaganda; officials of the state medical associations, those who will carry out the nationwide program, hailed it as a forward step in the direction of even greater public service.

Observers have remarked that the A.M.A.'s new program is not really new, that its basic elements have been part of the program of the A.M.A. and many of its constituent state associations for a number of years. However, this is the first time that all these items have been gathered together, put down

in black and white and adopted as a specific platform for all of medicine to follow.

There is a lesson in all this. Medicine has been so steadfast in devoting its energies to the improvement of the science of medicine that the practice side of the picture has been fairly well obscured. Now, due to changing economic conditions and political philosophies, medicine finds itself in the position of having to stress the economic side of medicine in order to protect the scientific side. Public relations, or advertising if you will, must be brought into play in order that the American people may see the medical side of a picture which has too often been painted in glowing colors by the Ladies Bountiful of tax-supported bureaus. As the people will be the final arbiters in the question of compulsory or voluntary health insurance, in order to vote intelligently they must have available the views of the profession of medicine to weigh against the tax-supported blandishments of bureaucrats.

Medical advertising by individual practitioners is still frowned upon for ethical reasons which are well founded. Medical advertising by medicine en masse is something else again and the A.M.A. 12-point program looks like the product to be publicized. The people will be the beneficiaries.